

POSITION	INITIALS	ID NO.	DATE
	<i>HS</i>		<i>04/20/00</i>
FEE DETERMINATION		<i>16</i>	<i>4-26-00</i>
O.I.P.E. CLASSIFIER		<i>6-4-77</i>	<i>6-17-00</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	<i>8/2/00</i>
2	<i>8/2/00</i>
3	<i>8/2/00</i>
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17	<i>✓</i>
18	<i>✓</i>
19	<i>✓</i>
20	<i>✓</i>
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39	<i>✓</i>
40	<i>✓</i>
41	<i>✓</i>
42	<i>✓</i>
43	<i>✓</i>
44	<i>✓</i>
45	<i>✓</i>
46	<i>✓</i>
47	<i>✓</i>
48	<i>✓</i>
49	<i>✓</i>
50	<i>✓</i>

Claim	Date
Final	
Original	
51	<i>✓</i>
52	<i>✓</i>
53	<i>✓</i>
54	<i>✓</i>
55	<i>✓</i>
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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